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SUBJECT: PROGRAM UPDATE: GENDER-BASED VIOLENCE IN THE DRC

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SUMMARY  
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**¶11.** Gender-Based Violence continues to be a threat to stability and affects the most vulnerable populations - women and children-in Eastern Congo. Recent reports indicate the problem is worsening, particularly in the province of North Kivu, but the problem is also severe in South Kivu, Maniema, and the Ituri District of Orientale. The United States, through the bilateral USAID Mission, the Office of Foreign Disaster Assistance (OFDA), and the U.S. Department of State, supports activities to respond to and prevent conflict-related and domestic violence through a variety of interventions in the Eastern Provinces and throughout the country.  
End summary.

**¶12.** The continued problem of ungoverned space in Eastern DRC, coupled with the ongoing conflict fueled by armed militias, an undisciplined national army and other negative forces, perpetuates the cycle of violence against women and children and poses serious threats to efforts to protect these vulnerable populations from sexual violence and abuse. In addition, continued population displacement due to ongoing armed conflict puts individuals at increased risk for abuse and threatens to undermine progress achieved through USG-supported interventions. In an environment where rape is used as a weapon against local populations by illegal armed groups, and an absence of the rule of law that permits the Congolese army and police to act with impunity, women and children continue to be the most vulnerable.

**¶13.** All age groups are affected by GBV, with the youngest recorded victim at six months old and the oldest at 92. USAID estimates that a minimum of 80,000-100,000 rapes and/or mutilations have taken place in DRC since 1996. GBV has a severe and negative impact on Congolese society. Victims experience shame and humiliation, rejection by family members, malnutrition, medical complications such as HIV, STIs, and vaginal and/or anal fistulas, psychological problems, and negative economic consequences. As perpetrators continue to go unpunished, the existing culture of impunity is exacerbated.

**¶14.** The United States has supported efforts to respond to GBV in the DRC through a variety of mechanisms. USG interventions have included providing care and treatment for GBV survivors, strengthening the justice sector's capacity to address acts of GBV, and advancing the protection of vulnerable populations, particularly women and children.

USAID INTERVENTIONS

**¶15.** Since 2002, with the use of USAID/DRC Development Assistance

(DA) funding, as well as resources provided under the Displaced Children and Orphan's Fund (DCOF), the Victims of Torture Fund (VOT), Trafficking in Persons (TIP) funding, and the fistula earmark, USAID has supported interventions to respond to Gender-Based Violence through care and treatment for survivors and awareness and prevention activities. USAID-supported programs aim to address the immediate, medium, and longer-term consequences of sexual violence for victims, their families, and communities so that victims of sexual violence are able to recover from trauma and reintegrate into their families and communities. Outreach and community mobilization activities, including legal advocacy, aim to prevent new acts of Gender-Based Violence in targeted areas. To date, USAID has allocated more than \$10,000,000 for GBV activities in Eastern DRC.

#### USAID PARTNERS

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¶6. International Rescue Committee (IRC) (\$4,868,096 from June 20, 2002 through March 31, FY 2008) provides local partners in North Kivu, South Kivu, and Katanga Provinces the necessary training and skills to provide direct services (medical care, psychosocial support, socio-economic reintegration, and legal referral when desired) to GBV survivors. IRC also provides support to Doctors on Call for Service (DOCS)(Goma, North Kivu) and Panzi (Bukavu, South Kivu) Hospitals, where more than 100 women receive fistula repair and other health services each month.

¶7. Cooperazione Internazionale (COOPI) (\$4,324,684 from September 30, 2004 to September 30, FY 2008) supports psychosocial rehabilitation and reintegration of survivors of sexual and gender-based violence in Ituri District of Orientale Province and Maniema Province. Working with a primary local NGO, Centre d'Intervention Psychosociale (CIP), COOPI has developed "Healing Centers" that work to respond to sexual and gender-based violence through confidential identification of victims, medical and legal referrals, socio-economic recovery, and community awareness campaigns.

¶8. UNICEF (\$518,000 in FY 2006) provides assistance to and helps ensure the safe reintegration of abducted girls and boys and other GBV survivors to their communities in Ituri District or Orientale Province and works to prevent further abduction, trafficking, and sexual violence.

¶9. Global Rights (\$1,819,000 from October 1, 2004 to September 30, 2007) was instrumental in the adoption and implementation of priority improvements to the DRC's legal framework, including the national Law against Sexual Violence, passed in August 2006. Global Rights also conducted public advocacy campaigns and awareness raising around the new law, as well as provided technical assistance to NGOs in Eastern Congo and throughout the country that are implementing legal assistance activities for GBV victims.

#### OFDA INTERVENTIONS

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¶10. All OFDA funded health projects in Eastern Congo have GBV components. OFDA currently has three active health projects: two in North Kivu with the NGO International Medical Corps and one in South Kivu with the NGO GOAL. OFDA anticipates two additional health projects in North Kivu in the near future that will also include GBV interventions.

#### STATE DEPARTMENT INTERVENTIONS

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¶11. In FY 2007, the State Department, through the Bureau for Population, Refugees, and Migration (PRM), supported the Center for Victims of Torture, which trains counselors and provides counseling support to refugees, including GBV survivors, in Katanga Province.

¶12. The State Department has identified support to the military justice sector as one key factor critical to eliminating the culture of impunity, particularly in relation to human rights violations and GBV. In FY 2008 the Department, in collaboration with the Defense Institute of International Legal Studies (DIILS), will support an

initial series of 12 one-week training seminars aimed at members of the military justice sector (military magistrates, military prosecutors, judicial police, and defense counsel). The planned topic of the first series is Sex Crime Investigation and Prosecution. Additional training and material support projects will be implemented as funds become available.

¶13. In FY 2008, the State Department, through the Bureau for Democracy, Human Rights, and Labor (DRL), is supporting two 12-month grants to the American Bar Association (\$555,000) and the Carter Center (\$425,000) which will focus on addressing GBV and impunity through justice sector and civil society support, including legal aid to GBV victims, human rights training for judges and police, NGO capacity building, and public debate around GBV and human rights. DRL is additionally providing a three-year grant to Journalists for Human Rights (JHR) (\$837,718), which will promote rule of law by building the capacity of national media to report accurately on human rights issues and creating a network of human rights reporters across the country.

¶14. The State Department, through the Embassy's Democracy and Human Rights Fund, also provides small grants on an annual basis to local organizations in Eastern Congo that provide services to survivors of GBV through identification of victims, income-generating activities, and judicial support. As an example, a recent grant, signed on October 23, will fund a project to "name and shame" hotel owners in Bukavu who facilitate child prostitution on their premises. Another 2007 grant will provide assistance to victims and support prosecution of offenders in Bunia, Ituri District.

#### PROGRAM RESULTS

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¶15. To date, through USAID-supported programs, more than 40,000 GBV survivors have received medical care, and thousands more have received other critical services, including counseling, family medication, socio-economic assistance, and legal referral when appropriate. USAID assistance resulted in the successful adoption of the national Law Against Sexual and Gender-Based Violence in August 2006. In FY 2007 alone, more than 800,000 individuals in Ituri District and Maniema Province participated in GBV community awareness activities, and many thousands more have been reached in North and South Kivu through the activities supported by IRC and other partners.

#### FUTURE INTERVENTIONS

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¶16. Post is developing an updated Social Protection strategy that integrates the efforts of USAID, Department of State, and other USG agencies. The strategy will serve as the basis for future program development of new activities to respond to and prevent Gender-Based Violence. GBV continues to be a high priority issue for Embassy Kinshasa, and the current instability in North Kivu points to the need for additional assistance in this area. As additional resources become available post is prepared to respond quickly to address additional immediate and long-term needs, such as expanding the reach of care and treatment programs, increasing public awareness and prevention efforts, and building on previous successes in legal reform and advocacy.

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